

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No	202776US2
	First Inventor or Application Identifier	Hiroshi UEDA, et al.
	Title	LIQUID CRYSTAL DISPLAY
Assignee Name:		ADVANCED DISPLAY INC.
Assignee Address:		997, Miyoshi, Nishigoshi-machi, Kikuchi-gun, Kumamoto 860 1198, JAPAN

10/08/02
 09/776812
 09/776812
 PTO

APPLICATION ELEMENTS
See MPEP chapter 600 concerning utility patent application contents

Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)

Specification Total Sheets

Drawing(s) (35 U.S.C. 113) Total Sheets **Formals**

4. Oath or Declaration Total Pages

a. Newly executed (original)

b. Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation / divisional w/ box 17 completed)

i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).

5. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification or Sequence Listing on:

i. CD-ROM or CD-R (2 copies); or

ii. Paper

c. Statements verifying identity of above copies

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))

8. Application Data Sheet. See 37 CFR 1.76

9. 37 C.F.R. §3.73(b) Statement Power of Attorney
(when there is an assignee)

10. English Translation Document (if applicable)

11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

12. Preliminary Amendment

13. White Advance Serial No. Postcard

14. Certified Copy of Priority Document(s) (1)
(if foreign priority is claimed)

15. Applicant claims small entity status.
See 37 CFR 1.27

16. Other: Notice of Priority

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below.

Continuation Divisional Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. Amend the specification by inserting before the first line the sentence:

This application is a Continuation Division Continuation-in-part (CIP)
of application Serial No. _____ Filed on _____


Which was published in English

Which was not published in English

This application claims priority of provisional application Serial No. _____ Filed _____

19. CORRESPONDENCE ADDRESS


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02/08/01

35 U.S.C. 113
 37 CFR 1.63(d)

Docket No. 202776US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Hiroshi UEDA, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: LIQUID CRYSTAL DISPLAY

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	2 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	× \$80 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$710.00
TOTAL OF ABOVE CALCULATIONS				\$710.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
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TOTAL				\$710.00

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- Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- A check in the amount of **\$710.00** to cover the filing fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
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Date: 2/8/01



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